



# The Medicalization of the Menstrual Cycle

***Selling Sickness • February 21, 2013***



Society for  
Menstrual  
Cycle  
Research

# Presenters

- Ingrid Johnston-Robledo; Associate Academic Dean, Castleton State College
- Margaret L. Stubbs; Professor of Psychology, Chatham University
- Joan C. Chrisler; Professor of Psychology, Connecticut College
- Paula S. Derry; *Paula Derry Enterprises in Health Psychology*
- Holly Grigg-Spall; Women's Health Blogger and Journalist, Author of *Sweetening the Pill* (Zero Books)
- Elizabeth A. Kissling; Professor of Women's and Gender Studies, Eastern Washington University
- Chris Bobel; Professor & Chair of Women's Studies; University of Massachusetts Boston

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Research

# Society for Menstrual Cycle Research

- Organization
  - Non-profit, international
  - Founded in 1979
  - Emphasis on research
- Members
  - Scholars, practitioners, artists, students, activists, policy makers
  - Many disciplines represented
- Mission

<http://menstruationresearch.org>

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Society for Menstrual Cycle Research

menstruationresearch.org

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## Society for Menstrual Cycle Research

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### Welcome to the Society for Menstrual Cycle Research

The Society for Menstrual Cycle Research is a nonprofit, interdisciplinary research organization. Our membership includes researchers in the social and health sciences, humanities scholars, health care providers, policy makers, health activists, artists and students with interests in the role of the menstrual cycle in women's health and well-being.

We strive to be the source of guidance, expertise, and ethical considerations for researchers, practitioners, policy makers and funding resources interested in the menstrual cycle. The Society holds biennial meetings featuring presentations of the latest research by members. Make plans now to attend our 2013 meeting in New York, June 6-8.

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## Making Menstruation Matter

### Society for Menstrual Cycle Research 20th Biennial Conference

Planning is underway for our 20th biennial meeting in New York, to be held June 6-8, 2013 at Marymount Manhattan College, NYC. Headed up by Ingrid Johnston-Robledo, our Conference team consists of David Linton, Christina Bobel, Peggy Stubbs, Nancy Reame and Alexandra Jacoby.

- HOME
- ABOUT THE SOCIETY
- 2013 CONFERENCE
- RESEARCH
- POSITION STATEMENTS
- RESOURCES
- MEMBERS ONLY
- CONTACT US
- NEWSLETTER
- BLOG (RE:CYCLING)



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# Shared Perspectives

- Centrality of menstrual cycle research to women's health
- Menstrual cycle as a vital sign of health
- Biopsychosocial/contextual approaches
- Advocacy: informed decision making, practices, and policies
- <http://menstruationresearch.org/position-statements/>
  - April, 2012: Naming Women's Midlife Reproductive Transition
  - October, 2009: Testimony to Office of Research on Women's Health at NIH, Chicago
  - October, 2007: Women's Health Initiative & Estrogen Therapy
  - June, 2007 (SMCR Meeting, Vancouver): Menstrual Suppression



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## New research on endometrial cancer, LARCs, and pelvic pain, & more Weekend Links

February 9th, 2013 by Elizabeth Kissling

- Celebrity femcare flashback: Here's Naomi Watts starring in a 1980s Australian Tampax ad.
- New research from Yale has identified **genes related to aggressive endometrial cancer**.
- **Because Life Can't Stop With A Period**: An update on the fantastic work of Elizabeth Scharpf and Sustainable Health Enterprises.
- Seven things **I learned from charting my cycle**.
- **Playtex has introduced a new 'intimate hygiene' product for women and men** that promises to clean your dirty sex organs so more people will want to have sex with you.
- *Cycle Harmony* presents **the eight leading causes of yeast infections and how to prevent them**.
- A prospective study from the Royal Hospital for Women in Sydney shows **positive results using Botox for pelvic pain**.
- Another first-of-its-kind study indicates that **LARCs (long-acting reversible contraceptives) containing progestins may increase the risk of type 2 diabetes in healthy obese women**.
- Lauren Bacon talks about **what they don't tell you in sex education**. It includes cervical fluid and other elements of *fertility awareness*.



BETTER after menopause, such as...

Recent Trackbacks:

- **Of Menstruators and Manhole Covers**: as Chris wrote in *New Blood*. It is a biological function, but like every other...
- **Society for Menstrual Cycle Research ::** Does Depo-Provera work like a charm or a curse?
- **Society for Menstrual Cycle Research ::** Big Breasts, Menopause, and Helena Bonham Carter
- **The Communicated Stereotype**: Stereotypes Are Skin deep. Knowledge Isn't.

Mac OS X dock with various application icons.

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# Feminist Theorizing on Medicalization of Menstruation

- Bio-medicalization as form of social control and regulation of women (Ussher, 2006)
- Stigma and medicalization (Johnston-Robledo & Chrisler, 2013)
- Pharmaceuticals related to cycle constructed as body-technology projects (Mamo & Fosket, 2009)
- Women as active agents (Shipman Gunson, 2010)
- Commodification and medicalization (Kissling, 2006)

# Selling Sickness: SMCR and the Call to Action

- “Patients and health care consumers are fully informed about and involved in individual health decisions, as well as in research priorities, research design, and regulatory policy.”
- “The usually less profitable non-pharmaceutical treatments and therapies, as well as disease prevention and community-centered interventions are raised in research and publishing priorities to levels comparable to drug and device therapies.”



# Presentation Themes

- Developmental context
- Dominant menstrual narratives and messages
  - Tainted femininity
  - Menstruation and cycle as source of inconvenience, stigma, disorder, and sickness
  - Need for products and technologies to restore femininity, sexual appeal, freedom, and control
- Selling menstrual sickness
  - Education and advertising
  - Consumer demand
  - Resistance

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# Menstrual Activism

A diverse constellation  
of strategic practices that resist  
the shaming, concealment, stigmatization,  
pathology and commodification  
of the menstrual cycle

Bobel, Chris (2010). *New Blood: Third-Wave Feminism and the Politics of Menstruation* Rutgers Univ Press.



**Everyone is whizzpopping, if that's what you call it, Sophie said. Kings and Queens are whizzpopping. Presidents are whizzpopping, then why not talk about it? Glamorous film stars are whizzpopping. Little babies are whizzpopping. But where I come from it is not polite to talk about it.**

**Redunculous! Said the BFG. If everyone is making whizzpoppers, then why not talk about it?**

**The BFG, Roald Dahl 1982 Puffin Books. P. 67**

# Menarche Rituals





Sustainable Cycles:  
Sarah Konner and Toni Craige  
<http://sustainablecycles.wordpress.com/>







# Zana Africa

<http://www.zanaafrica.org/>



**THE PAD PROJECT:**  
EmPowering  
African Dreams

*Click to give to our campaign  
now through April 15th!*

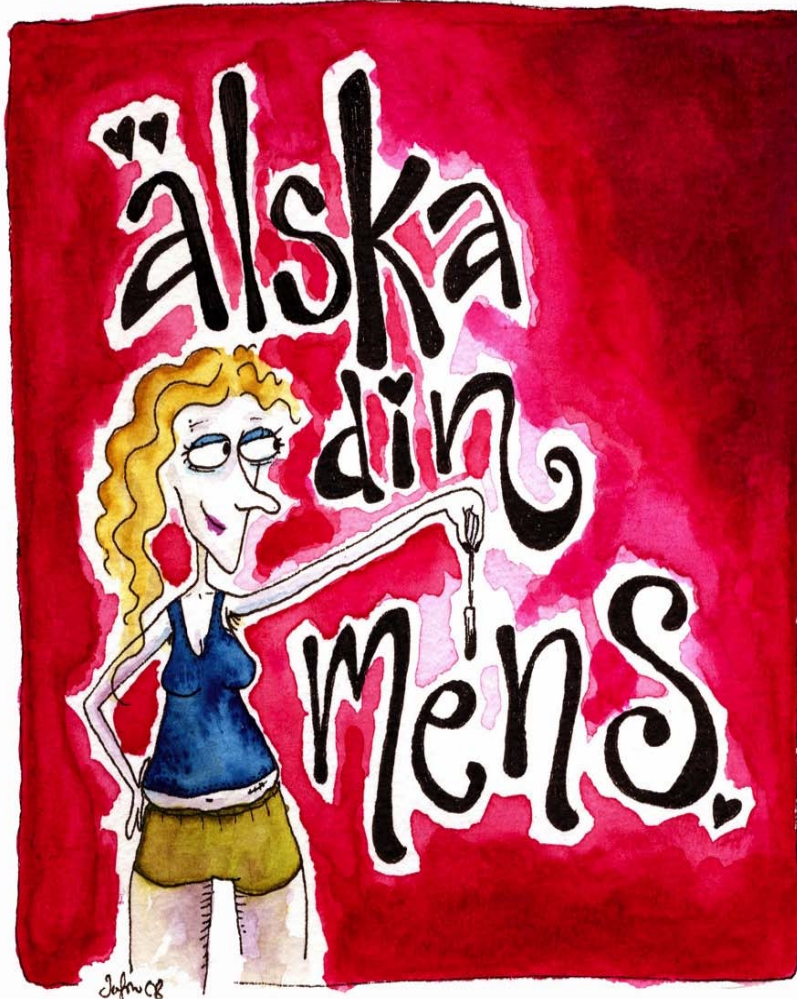
**ZANA**  
TOOLS FOR  
TRANSFORMATION

A horizontal line of small yellow teardrop shapes runs across the bottom of the image.



**Josefin  
Perisdotter**

<https://sites.google.com/site/lovethecurse/>







Class Projects  
Breanne Fahs  
“Psych of Gender” at ASU



Men who buy menstrual products rock! Help us break the silence of menstruation and talk about it right here. It's about bloody time we stopped being embarrassed!







Adventures in Menstruating:

Chella Quint

<http://chellaquint.wordpress.com/>



**My first**

# Adventures in Menstruating

by Chella Quint



MP3  
POD  
CAST

# CHELLA QUINT

AN AUDIO  
READING FROM  
"ADVENTURES IN  
MENSTRUATING #1"

IN  
**"THE STAIN"**

FALL OF AUTUMN.COM

A podcast cover for 'The Stain' by Chella Quint. The background is purple with a black dot pattern. A woman in a white dress with a red belt is pointing towards a large, glowing, red and white flame-like shape. The text 'CHELLA QUINT' is written in large, bold, black letters within the flame. Below the woman, the text 'AN AUDIO READING FROM "/>





YOU'D THINK WE'D NEVER

NOVEMBER 2008

# bledbook

AVOIDING THE TOPIC OF MENSTRUATION SINCE 1903

**CHART YOUR CYCLE!**

Know when you'll be unclean.

**FORGET FEMINISM:**  
Who needs it when you can **BUY STUFF!**

**C  
U  
R  
S  
E  
D**

La, la, Louisiana  
Periods?  
We're not listening!

**Go eat ice cream!**

It's so much easier than dealing with your body issues!

**ONE TO SNUB?**  
We form your opinions, so you don't have to!

**Don't look at: [www.chartyourcycle.co.uk](http://www.chartyourcycle.co.uk)!**

**YOUR HEALTH WORRIES EXPLAINED:**  
Let's all just pretend there's nothing down there!



"Off road or on, now I ride with confidence!"

- Parker, 19

**When Parker cycles with his girlfriend, he relies on Skids to protect him from embarrassment. Skids pads have been designed with a guy's needs in mind, giving you peace of mind - every time.**

**Skids - Safe in the saddle!**



Only at



[www.skidspads.co.uk](http://www.skidspads.co.uk)

*THERE'S NO BIOLOGICAL REASON  
FOR A MAN TO EJACULATE.*

Now, there's **Semen-Off**  
– finally, a drug for seminal suppression.



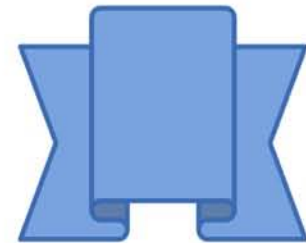
Semen-off treats  
semen disorders like  
“asemenation” or  
“irregular ejaculation”.

If you're finished having  
your family, and aren't  
ready for surgery, there's  
Semen-off.

\* Use of Semen-off to treat semen disorders  
is not approved by Health Canada.



*Also Try New  
Penis Pads*



To discreetly collect  
your seminal flow.

Created by Lisa Leger, Inspired by the essay “If Men Could Menstruate” by Gloria Steinem





<http://you-are-loved.org/>



You ARE Loved:  
Toxic Shock Syndrome  
Awareness

# Premenstrual Syndrome (PMS)

Joan C. Chrisler, Ph.D.  
Connecticut College

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Do the hormones associated with the menstrual cycle have the power to turn a normally placid and nurturing woman into an enraged menstrual monster who can ruin her career, drive her family away, and perhaps even endanger the future of Western civilization?

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# Self-help Books Say Yes

“When I am in PMS mode, no one is safe”(Ferrare, 1999).

“There remains the nagging underlying fear that this untamed monster will, at any time, raise its ugly head and devour family or friends with uncontrolled words, moods, or actions” (Frangipane, 1992).

# So Do Women's Magazines

- The menstrual cycle is “a cycle of misery,” “a hormonal roller coaster,” “the battle between estrogen and progesterone.”
- The premenstrual and menstrual phases of the cycle are “weeks of hell” during which women are “hormone hostages,” “crippled,” “handicapped.”
- Premenstrual women are “raging beasts,” “raging animals,” “Dr. Jekyll and Ms. Hyde.”





## So Do “Entertainers”

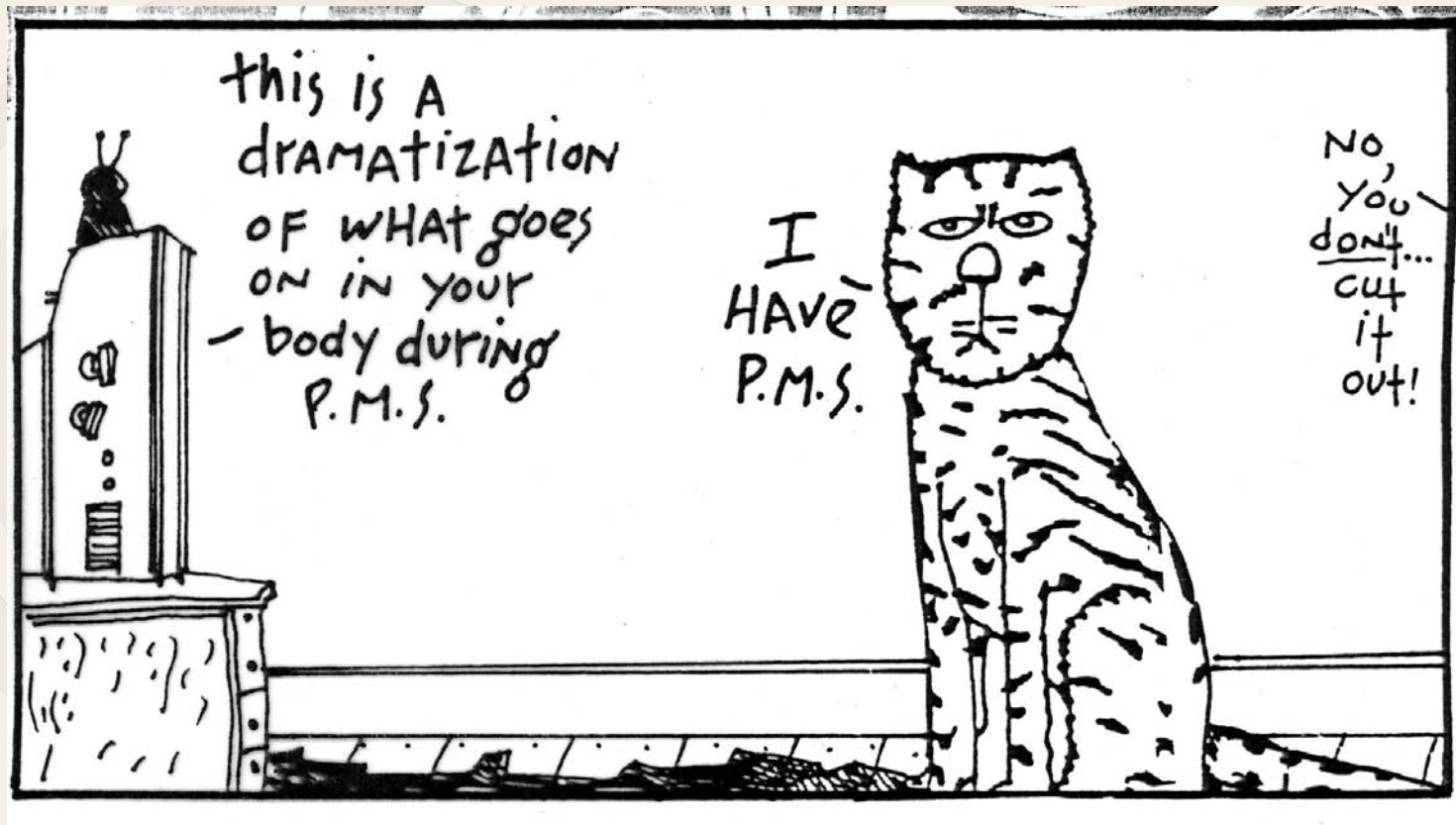
- Rush Limbaugh suggested that Hillary Clinton has PMS.
- G. Gordon Liddy hoped that Sonia Sotomayor wouldn't be writing important decisions when she is premenstrual.
- Many references to PMS on sitcoms and Comedy Central specials.

## So Does Material Culture

- Bumper stickers & buttons (“A woman with PMS and ESP is a bitch who knows everything”), greeting cards (Don’t carve the pumpkin when you have PMS), joke books (*PMS Attacks & Other Inconveniences of Life*), T-shirts (“I have PMS and a gun; any questions?”), signs (“My worst fear is that it’s not PMS, it’s my personality”).
- There’s even an app for that (PMS Buddy, Track Your Bitch).

- Since 1980, PMS has evolved from the phenomenological equivalent of a bad hair day to a psychiatric disorder that requires pharmacological treatment.
- It has evolved from a little-known experience to a phenomenon so common that almost every woman thinks she “has” it.





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# A Brief, Political History

- 1931 - Frank describes premenstrual tension (“foolish and ill-considered actions”)
- 1964 - Dalton expands symptom profile, coins term premenstrual syndrome
- 1987 - *DSM-III-R* includes late luteal phase dysphoric disorder (LLPDD)
- 1994 - *DSM-IV* includes premenstrual dysphoric disorder (PDD)
- 1999 - Prozac becomes Sarafem

# Theories of PMS

- Hormonal or neurotransmitter malfunction
- Nutritional deficits
- Sleep deficits
- Stress
- However, *no* biochemical or physiological marker has *ever* been found to discriminate reliably between women who do and do not report PMS.



# Do changes = symptoms?

- The determination of when an experience becomes a symptom is a *personal* one.
- Decisions about which symptoms group together into a *syndrome* is a social construction.
- Most people today seem to think that *any* change in the second half of the cycle is evidence of illness (i.e., the premenstrual phase itself *is* PMS).

# PMS Embracers

- Women who are under a lot of stress (e.g., superwomen).
- Women with inadequate coping skills and/or resources.
- Women who adhere (or wish to) strongly to the feminine/good mother stereotype (self-serving bias).
- Women with a history of body-related trauma (e.g., sexual assault).
- Women who consume too much media?

# PMS Resistors

- Feminist women who reject the medicalization of their bodies.
- Women with positive attitudes toward menstruation.
- Women who experience mild/moderate changes and cope well.
- Women who believe they have a right to a full emotional life and a chance to rest when they want/need it.



# Menstrual Educational Materials: Priming for a Medicalized Understanding of Menstruation

Margaret L. (Peggy) Stubbs  
Chatham University  
Pittsburgh, PA

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# Menstrual Education is IMPORTANT

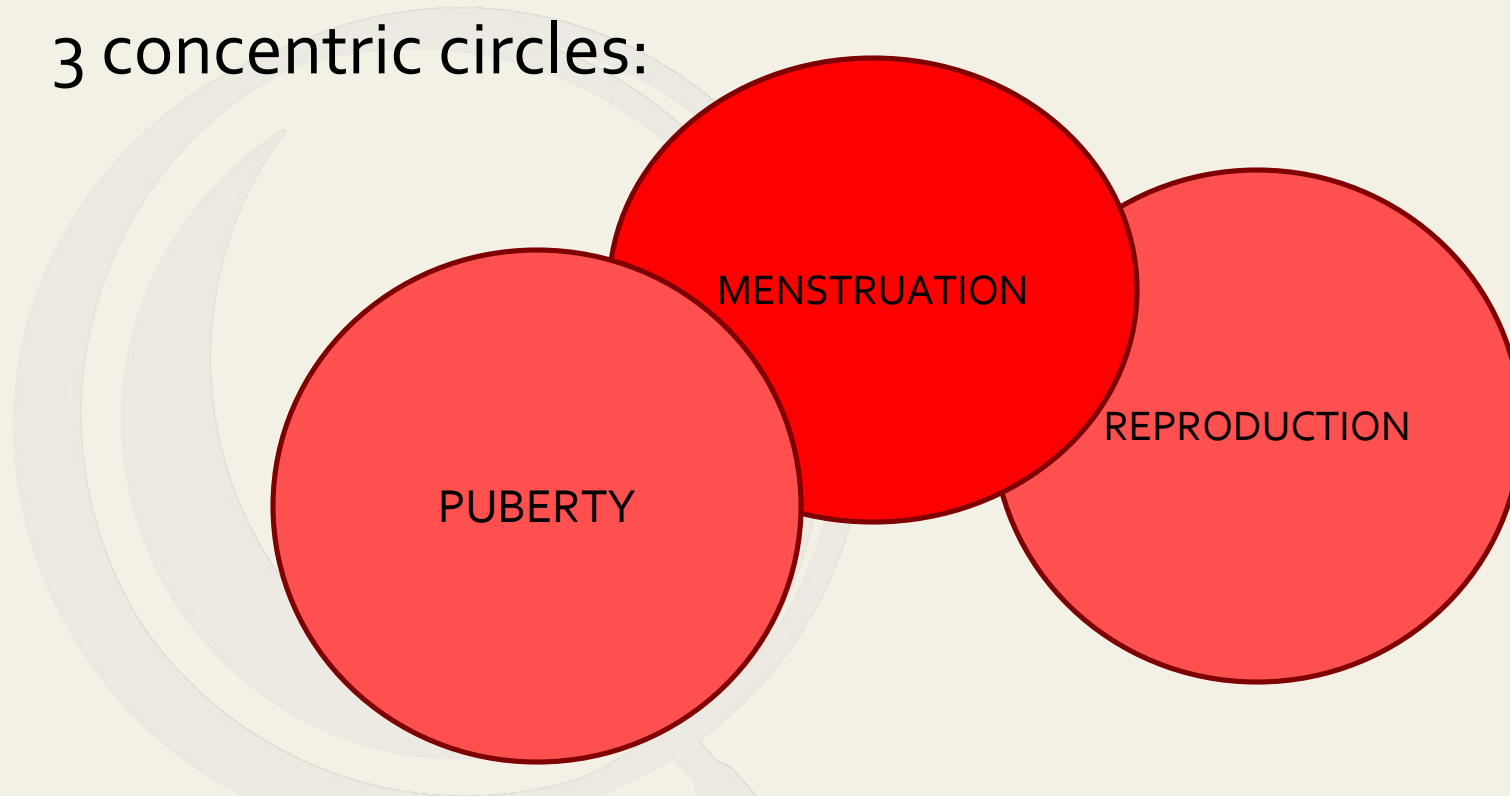
- Girls reporting they were well prepared had a more positive reaction to menstruation
  - » e.g., Koff, Rierdan & Stubbs, 1989
  - » Houston, Abraham, Huang, & D'Angelo, 2006

Later in life:

- Women with positive early experiences are more satisfied with their bodies than women with negative earlier experiences
  - » McPherson and Korfine, 2004
- Women with more shame about their bodies and menstruation felt uneasy about sexual encounters and had difficulty asserting themselves in sexual situations.
  - » Schooler, Ward, Merriwether, et al., 2005

# Menstrual Education is CHALLENGING

3 concentric circles:



How much information about each??  
And to girls of what age?

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# Developmental Considerations

## Early Adolescent Girls' Cognitive Ability



- Concrete thinkers, not critical thinkers
- Categorizers/Rule bound: various attributes determine what's IN or OUT
- More prone to stereotypical thinking than analysis



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# In most material...

1. an overfocus on explanations of biological aspects, and underrepresentation of social psychological aspects
2. focus on hormonal control of puberty *and* menstruation  
descriptions of puberty focus on aspects of instability, upheaval, being out of control: a trying period of development
3. focus on “symptoms” vs. changes  
mostly negative physical (and psychological) described as normative
4. alarmist language about what can go wrong

***These elements conspire to provide a biomedical framework for understanding menstruation***



# Puberty is Problematic

“Your body and mind are going through lots of changes – some can feel **strange, exciting**, and some maybe even a little **scary**.”

(AMA Girls Guide to Becoming a Teen, p. 6)

“This is a very confusing and awkward time for all teenagers. Expect to feel weird. It's **normal!**”

[http://www.iwannaknow.org/teens/sexualhealth/puberty\\_girls.html](http://www.iwannaknow.org/teens/sexualhealth/puberty_girls.html)



The more information on puberty, the more biological(biomedical/health) information...

e.g., height, weight, diet (eating disorders), acne, body odor, body image, STIs, drugs, etc...

Internet sites permit navigation to many subtopics

e.g., whether to shave your pubic hair, or have sex during your period

Q and A – by experts or “teens”



# Hormones “control” the physical... and the emotional aspects of puberty

“... changes ... occur for a variety of reasons. One reason may be that your hormones are changing: **hormones are chemicals that control** many activities in your body, including growth.” (AMA Girl’s Guide, p. 10 )

“The **hormones that rush around** in your body at puberty make these organs do new things.”

(Why Do I have Periods, p. 13)

“These changes in your **hormones can also affect your mood.**”

(AMA Girl’s Guide, p. 10)

# Menstruation

[Menstruation] “is carefully **controlled by your body.**”

(Why Do I Have Periods, p. 12)

“**Hormones cause** an ovary to release one ripe egg... **prepare** the uterus in case the egg is fertilized.”

(Why Do I Have Periods, p. 15)



# It's all perfectly NORMAL!!!

“...the kind of bleeding you do during your period is **normal**, and is **almost never dangerous**.”

<http://pbskids.org/itsmylife/body/puberty/index.html>

“...not something to be scared of.”

<http://www.avert.org/puberty-girls.htm>

“It's **totally normal to be nervous** about having the talk with your mom about your first period. “

“...your period can vary from 20–35 days and **still be normal**

([www.beinggirl.com](http://www.beinggirl.com))



# Nuts and Bolts Information

Variation is emphasized in cycle length, period length, color and thickness of blood, how much blood is lost (3 tsp – 1 cup!)

Summary/average usually follows – most likely to be remembered by youngest girls



# When will I start?

Take cues from your body:

- **Developing Breasts.** First, you'll get breast "buds." (Your breasts then can take up to 3–4 years to fully develop.) Generally you will get your period 2–3 years after your breasts start developing.
- **Growing Pubic Hair.** Right after your breasts start to form, you'll start developing pubic hair. It will be soft and thin at first, then gradually become coarser. Your period usually arrives around 1–2 years after the hair development.
- **Discharge.** This is the big sign. You'll start to experience vaginal discharge that will be either white or yellowish. *If you like, you may want to start using **Always Pantliners** to protect your underwear.* Your period should start around 6–12 (but up to 18) months after the start of discharge. (*italics mine*)

([www.being.girl.com](http://www.being.girl.com))

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**Q: How should/will I feel?**

**(A: physically bad... “symptoms”)**

“Many girls and women start to notice they feel different for a few days before their period starts. Some feel tired, irritable, or sad. Others feel a little sick or get headaches, Some women find they get sore breasts and a bloated, sticking-out stomach. **These feelings are caused by the hormones racing around** your body. They even have their own name: premenstrual syndrome (PMS).”

(Why Do I Have Periods? P. 16)

“All these **symptoms are normal but it’s important not to let them ruin your day (or your week!)**”

(AMA Girl’s Guide, p. 71)

# How to deal with cramps...

If you have cramps with your period, regular exercise, a heating pad, a warm bath, and nonsteroidal anti-inflammatory drugs (NSAIDs) such as ibuprofen or naproxen may help. **If you are younger than 20, do not take aspirin.** Aspirin raises the risk of Reye syndrome, a disease that affects the brain and liver. If these treatments don't help, talk to your doctor about prescription medicines.

<http://teens.webmd.com/girls/facts-about-puberty-girls>

# Management

“Tampons (worn internally) should be changed every four hours in order to avoid the **risk** of a very rare bacterial infection called **Toxic Shock Syndrome (TSS)**.”

[http://www.iwannaknow.org/teens/sexualhealth/puberty\\_girls.html](http://www.iwannaknow.org/teens/sexualhealth/puberty_girls.html)

Most Important -

“Tampons **MUST** be changed every few hours and should **NEVER** be left in the vagina for longer than eight hours. If you do, in rare cases, girls can develop something called Toxic Shock Syndrome, which will need urgent medical treatment.” (Girl Talk, p. 24)



# Irregularity

“For teens, especially, there is a much broader definition of **normal**...During the first year or two of having periods, **"irregular" falls within the "normal" tent!** ”

Again: a 10 item list of things to watch out for follows – with advice to see your doctor.

([www.beinggirl](http://www.beinggirl.com))

# What's Missing?

Positive information about growing up

References to power of menstruating woman, origin myths, ceremony and celebration

Insights from psychosocial and historical research about menstrual attitudes and experiences

References to women's accomplishments, even while menstruating!

In descriptions of what can go wrong, much less "alarmist," more "matter of fact" language

A more linear approach? perhaps in websites, a "return to" option —

# Periods, Pills, and Postfeminism

Elizabeth A. Kissling

Women's & Gender Studies Program

Eastern Washington University

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# What is postfeminism?

McRobbie (2004) explains that postfeminism “refer[s] to an active process by which feminist gains of the 1970s and 80s come to be undermined” while appearing to engage feminism, especially through tropes of freedom and choice (p. 251).





# What is Postfeminism?

Rosalind Gill: Postfeminism is a sensibility characterized by

- the treatment of femininity as a bodily property;
- a shift from sexual objectification to women as sexual subjects;
- an increasingly sexualized mainstream media and culture;
- the need for constant self-monitoring and surveillance;
- a makeover paradigm that emphasizes the importance of self-transformation;
- an emphasis on individualism and choice;
- a focus on consumption and commodities;
- and a reassertion of the importance of sexual difference.

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# Advertising Sells More Than Products



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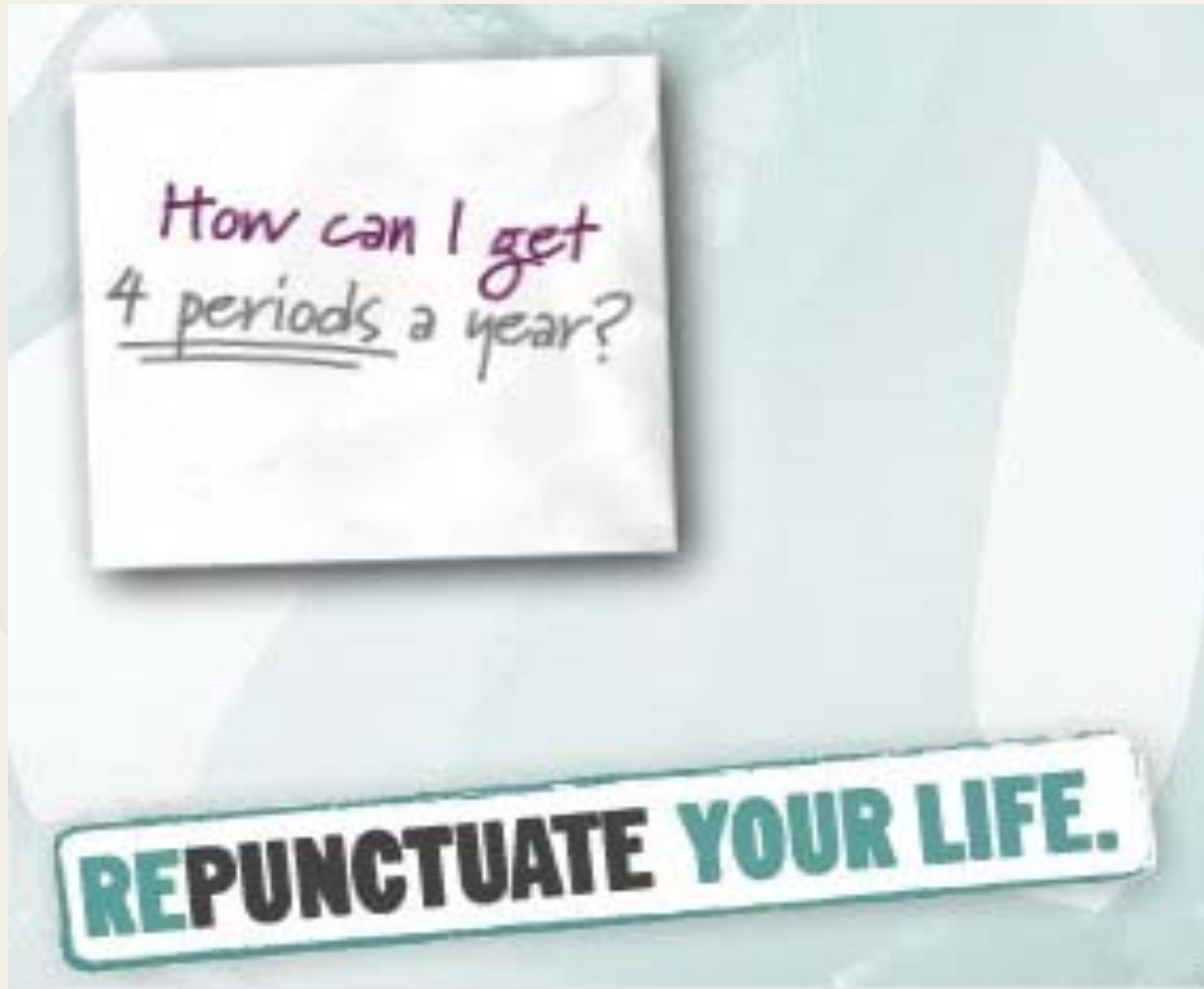


# How Ads Work

- Purpose of advertising is to convince consumer of need for particular product.
- Persuade the consumer that a particular product best meets this need when there is little product differentiation (e.g., aspirin, bottled water)
- “You drink Evian’s advertising, not the fluid.” (James Twitchell, 2002)



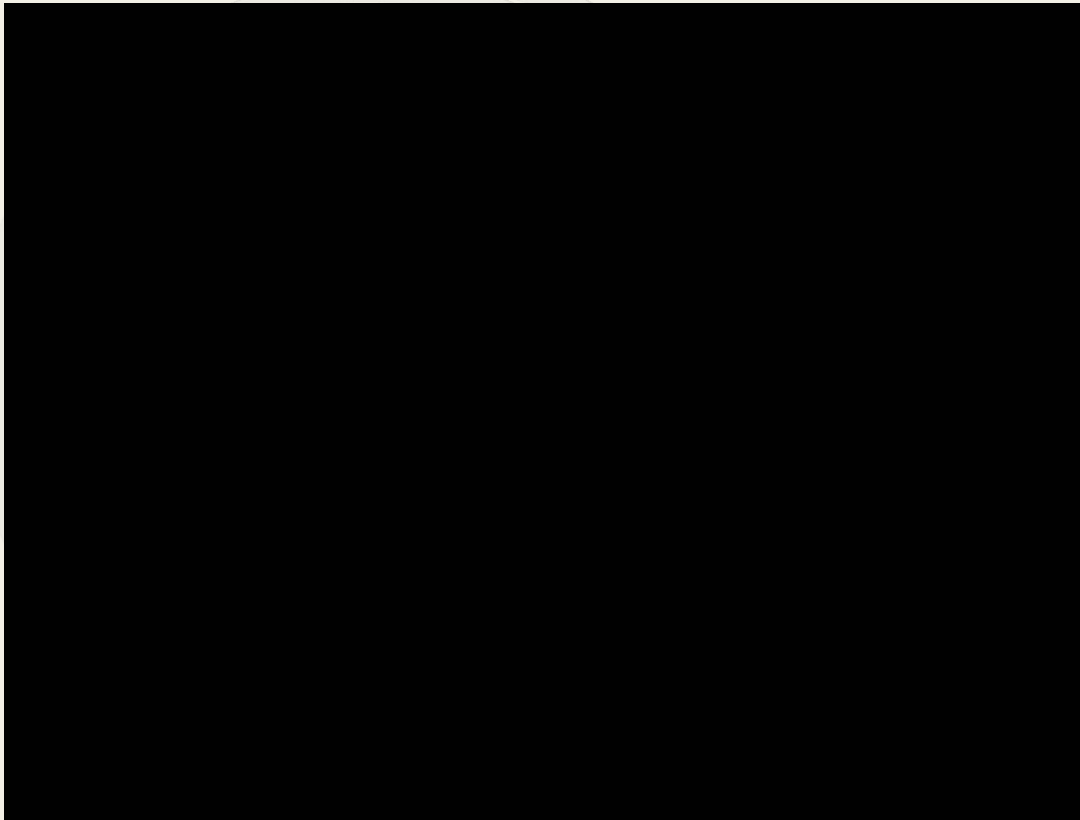
# Seasonique: Re-Punctuate Your Life



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## Seasonique: Re- Punctuate Your Life



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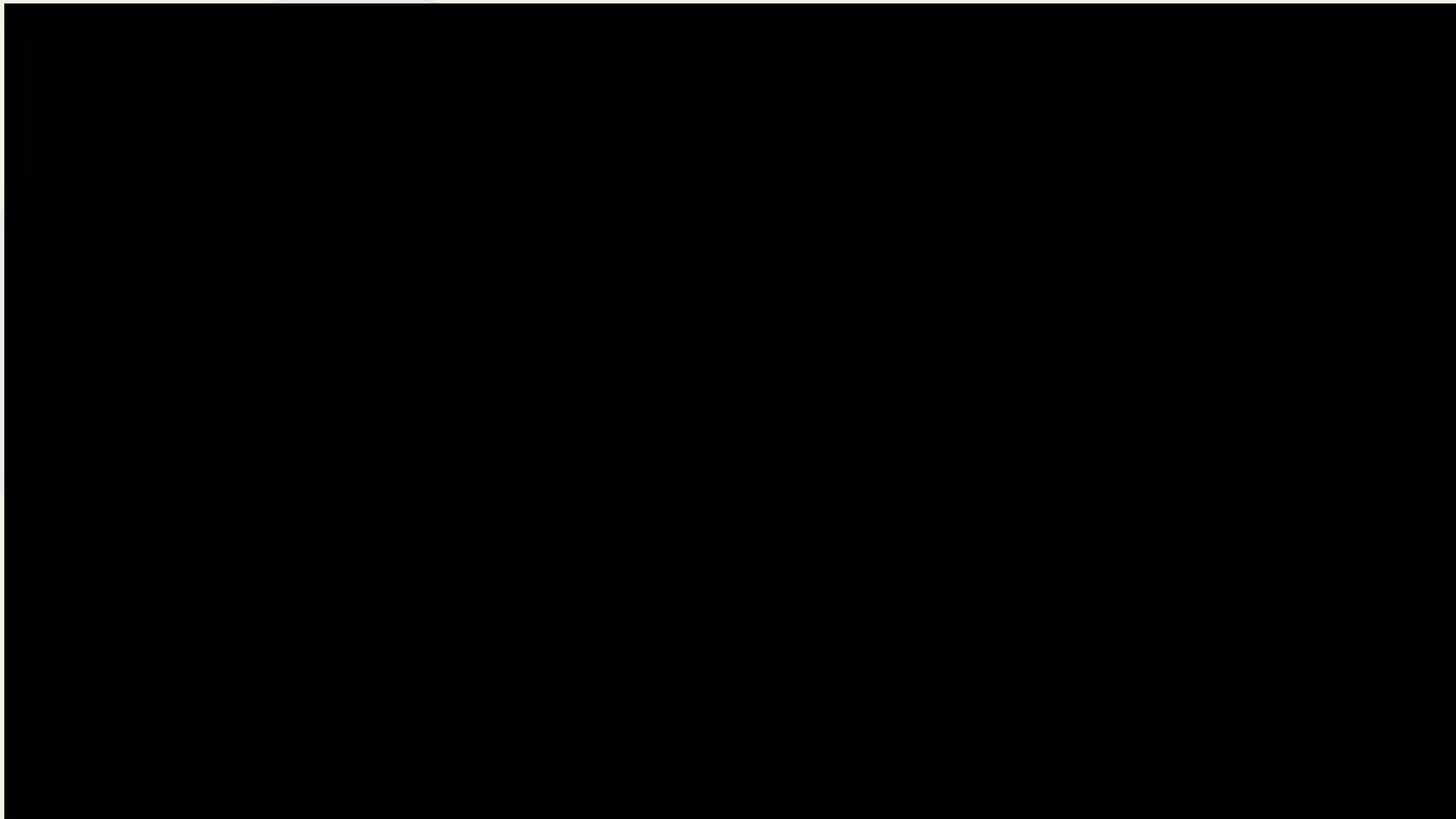
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# Re-Punctuate Your Life

- If Seasonique's effectiveness is the same as other birth control pills, why take it?
- Sold on symbolic value rather than use value.
- Re-punctuate your life with Seasonique (move your periods).

# 2011 ad for U by Kotex (U.S.)



I spilled my secret and he almost picked it up!



It's Pursettes for me from now on!

Just call them the tote tampons.

**PURSETTES SAVE YOU ALL SORTS OF EMBARRASMENTS.**

To prove it, send for a free compact, filled with four regular Pursettes® or three super-absorbent Pursettes Plus® tampons (indicate choice). Mail 25¢ for postage handling to Campana, Dept. S-024, Batavia, Illinois 60510. See what a great protector the tote tampon can be!

Offer good in U.S.A. only. Expires December 31, 1974.

Ad for Pursettes brand tampons, 1974

# Postfeminist Body Project

The feminine body is a project forever in development; women and girls are always working on constructing an idealized femininity.

The discourses of body projects are those of freedom and choice, often framed in terms of 'feeling good about oneself'.

# Ideal Postfeminist Femininity

The idealized female body in postfeminist media culture does not menstruate, or does so covertly, and/or under limited, controlled conditions (e.g., only 4 times/year).

She needs consumer products (pharmaceutical or femcare) to become this idealized feminine figure.



# Postfeminist Periods

Like other postfeminist projects, both of the U by Kotex and Seasonique campaigns are built upon “a discursive logic that . . . defines the female body as a fundamentally abject body and regulates a population of these bodies in various ways: most recently in ways specifically tied to menstruation, deploying postfeminism and its rhetoric of self-empowerment to accomplish this task” (Gunn & Vavrus, pp. 113-114).

# Postfeminist Neoliberal Subjectivity

Through her *choice* to use these products, she is able to keep her female, feminine body under easy *surveillance* and *maintain sexual and economic availability* to others. She thus more closely approximates the ideal neoliberal subject.

# Menopause

## Selling Sickness, Feb. 2013

Paula S. Derry, Ph.D.

Paula Derry Enterprises in Health Psychology

[Paula.Derry@gmail.com](mailto:Paula.Derry@gmail.com)

- Menopause is the end of menstruation. It is a human universal, occurring at some point during midlife for those women with a natural menopause (vs. a menopause due to surgery, disease, etc.).
- While multiple discourses about menopause exist, I am talking here about one set of discourses associated with medicalization.

- Menopause has a long history of being medicalized. What it is that is supposed to constitute unhealthiness changes over time, but the underlying message does not. An earlier idea was that women felt that they lost their femininity or developed identifiable mental illnesses. A more recent emphasis has been that women become vulnerable to a number of physical illnesses, like heart, bone, or brain disease.



The first point is that a medicalized viewpoint is portrayed as scientific fact, whereas the scientific literature in many cases is at the very best uncertain. For example, [emedicinehealth.com](http://emedicinehealth.com), a legitimate and influential medical website, has a Menopause Medical Health Quiz. The quiz is supposed to help women evaluate their knowledge of menopause.

# Menopause Medical Health Quiz-

-Test your IQ  
[emedicinehealth.com](http://emedicinehealth.com)



The questions, to be scored as correct, require that a woman agree that heart disease risk increases after menopause and that anxiety is a usual symptom of menopause—that is, a medicalized viewpoint is presented as fact. However, neither of these are scientific facts. For example, within the website itself, a page on menopause symptoms states that it is unclear how much increased risk of heart disease is due to menopause and how much to aging.

Q:Menopause increases health risks like:

A: Heart Disease

B: Sexually Transmitted Diseases

C: Osteoporosis

D: A & C

The correct answer is: D

Explanation: With menopause comes a greater chance of heart disease (which is the No. 1 cause of death for U.S. women) and osteoporosis (dangerously thin bones). Before menopause, estrogen gives women some protection against those conditions, so when estrogen levels ebb with menopause, that advantage is over.



## Menopause Symptoms emedicinehealth.com

“Heart disease risk increases after menopause, although it is unclear exactly how much is due to [aging](#) and how much is caused by the hormonal changes that occur at the time of menopause.”

Q: Which is NOT a usual symptom of menopause?

A: Night sweats

B: Back pain

C: Headaches

D: Anxiety

The correct answer is: B

Explanation: Back pain is not a usual symptom of menopause. Typically menopause has three main types of symptoms: physical, emotional and sexual. Problems and symptoms can include hot flashes, night sweats, profuse sweating, difficulty sleeping, headaches, decreased bone density, moodiness, anxiety, forgetfulness and problems with concentration, and vaginal dryness.

A second point is that even when on the surface the portrayal of menopause has changed, the underlying message does not. For example, the Menopause Quiz contains a graphic—three youthful-looking women, happy, attractive, sensual, alert. This is very different from portrayals of menopause fifty years ago, when women would more likely appear old, unhappy, drab. Yet, as stated, the underlying message remains that menopause causes health problems.

# Menopause Medical Health Quiz-

-Test your IQ  
[emedicinehealth.com](http://emedicinehealth.com)



A third point is that there are correspondences between certain media messages and what in an individual would be called dysfunctional thoughts. That is, cognitive/behavioral psychotherapy is based on the idea that how an individual thinks about her experience influences her level of distress and the effectiveness of her coping. Catastrophic thoughts, for example, increase likelihood of distress. Catastrophic thinking involves having an image of the worst thing that can happen, and assuming that the worst thing that can happen is likely.



# Media Messages and Individual Ways of Thinking

## Cognitions That Are Associated with Distress, Ineffective Coping:

- Catastrophizing: expecting that the worst is likely.
- No control
- Passive Coping
- Negative Self-attribution
- Challenges to Sense of Self

# Catastrophic Thinking

Articles in major newspapers or websites in which women graphically describe extremely debilitating experiences associated with the transition to menopause, and suggest that these are common.

# Media Portrayals of Debilitating Menopause Experiences

The Estrogen Dilemma By Cynthia Gorney,  
NY Times April 12, 2010

Rough Transition into Menopause By Valerie  
Ulene, Special to the Los Angeles Times  
September 6, 2010

What I Know for Sure Oprah, O The Oprah  
Magazine January 20, 2009

Oprah: “I started talking to more friends in their 40s and 50s, and soon we were all aha'ing each other.”

Gorney: I started taking estrogen because I was under the impression that I was going crazy, which turns out to be not as unusual a reaction to midlife hormonal upheaval as I thought.

Ulene: Talking with friends my age tends to make me feel better — not their comforting words so much as the knowledge that they're experiencing many of the same things...

Thank you.

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